

# City of Detroit      2000

## Individual Income Tax — Extension Request

 or Fiscal Year Beginning     2000, Ending      

Social Security Number

         

Spouse's Social Security (if filing joint)

         

First Name

                  

MI

Last Name

                    

Spouse's First Name (if filing joint)

                  

MI

Spouse's Last Name (if filing joint)

                    

Home Address (Number and Street or Rural Route)

                    
                    

City or Town

State

Zip Code

                    
 
     

Reason for Extension:

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 If approved, this extension will be for 3 months. If you would like to request an additional 3 month extension (total 6 month extension) check here: ☐

- |   |   |                      |                      |
|---|---|----------------------|----------------------|
| 1. Total estimated tax liability for 2000 .....   | ➔ | <input type="text"/> | <input type="text"/> |
| 2. Tax withheld and/or other city credit .....  | ➔ | <input type="text"/> | <input type="text"/> |
| 3. 2000 Estimated Payments .....  | ➔ | <input type="text"/> | <input type="text"/> |
| 4. Detroit tax paid for you by a partnership .....  | ➔ | <input type="text"/> | <input type="text"/> |
| 5. Total Payments (add lines 2 through 4) .....   | ➔ | <input type="text"/> | <input type="text"/> |
| 6. If line 1 is larger than line 5 enter amount of tax due. (Make check payable to: Treasurer, City of Detroit) ..... | ➔ | <input type="text"/> | <input type="text"/> |

Under penalty of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

(Signature of preparer other than taxpayer)

Date

Taxpayer's Signature

Date

Address

I.D. number

**MAILING INSTRUCTIONS: Due Date: This return is due April 30, 2001 or at the end of the fourth month after the close of your tax year.**
**MAIL TO:** TREASURER, CITY OF DETROIT  
 P.O. BOX 33530  
 Detroit, Michigan 48232

 Refund and all others: DETROIT CITY INCOME TAX  
 2 Woodward Ave., Room B-3  
 Detroit, Michigan 48226
**For office use only.**Denied ☐
 Reason: 

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